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	APPLICATIO					RD_		: : :::			
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	CLAIMS AS	(Column 1) (Co			no 2)		MALL EN		OR	OTHER SMALL	
FOTAL CLAIMS		1				. [RATE	FEE]. [RATE	FEE
FOR			NUMBER FILED .		NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS		// minus 20=		*			X\$ 9=		OR	X\$18=	
NDEPENDENT CLAIMS		Z minus 3 =		<u>' </u>	<u>.</u>	Ī	X42=		OR	X84=	
AULTIRLE DEPEN	NDENT CLAIM PE	RESENT	SÉNT.				+140=		OR	+280=	
If the difference	in column 1 is	less than zero, enter "0" in co			olumn 2	t	TOTAL		OR	TOTAL	750
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)					(Column 3)		SMALL I	ENTITY	OR	OTHER SMALL I	
K .	CLAIMS REMAINING AFTER AMENDMENT			IEST BER DUSLY	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1, is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

** ADDIT. FEE

** TO THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) Is the highest number found in the appropriate box in column 1.

OR

OR

+140=

X84≟"

+280=..

...